



Complete if Known Substitute for form 1449/PTO Application Number 10/521,349 INFORMATION DISCLOSURE July 13, 2005 Filing Date STATEMENT BY APPLICANT First Named Inventor John A. Gelardi 3728 Art Unit (Use as many she ets as ne cessary) L. K. Bui Examiner Name Sheet of 1 Attorney Docket Number 65845(52888) 1

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Examiner	Cite	Document Number	Publication Date	Name of Patentee or	Pages, Columns, Lines, Where Relevant Passages or Relevant			
Initials*	No.1	Number-Kind Code ² (if known)	MM-DD-YYYY	Applicant of Cited Document	Figures Appear			
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Examiner Initials*	Cite No.1	Foreign Patent Document Country Code ³ -Number ⁴ -Kind Code ⁵ (<i>if known</i>)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages Or Relevant Figures Appear				
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	CA	Copy of International Search Report dated July 19, 2004					

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